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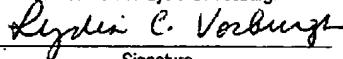
Original: To follow via mail To follow via courier To follow via email Original will not followFax Contains: 14 pages (including this sheet). If incomplete, call (650) 845-5044.**OFFICIAL FILING****Application No. 09/513,554****Filing Date: February 25, 2000****Inventors: Awele Ndili, et al.****Title: System for Automatic Data Retrieval on an Internet Protocol Network****Attorney Docket No.: 24286-702**

Attached are an Amendment in response to Final Office Action dated June 28, 2005, a Request for Continued Examination and a Petition for Extension of time.

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37 CFR §1.8

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	09/513,554
		Filing Date	February 25, 2000
		First Named Inventor	Awele Ndili, et al.
		Art Unit	2144
		Examiner Name	Thanh Nguyen
Total Number of Pages in This Submission	13	Attorney Docket Number	24286-702

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Request for Continued Examination
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
The director is hereby authorized to charge \$60.00 for one month extension of time fee and \$395.00 for Request for Continued Examination (RCE) fee.		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	WILSON SONSINI GOODRICH & ROSATI		
Signature			
Printed Name	U.P. Peter Eng		
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Typed or printed name	Lydia C. Vosburgh	Date	October 28, 2005

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